



**Kentucky Office of Highway Safety**

**KENTUCKY TRANSPORTATION CABINET**

**KENTUCKY OFFICE OF HIGHWAY SAFETY**

**3D SIMULATOR EDUCATIONAL PROGRAM  
(DRUNK & DRUGGED DRIVING/DISTRACTED DRIVING)**

**School Administrator Consent and Release Form**

\* \* \* \* \*

I, \_\_\_\_\_, School Administrator (Principal/Vice Principal) at \_\_\_\_\_ High School, hereby acknowledges that all parents or guardians of the student drivers participating in the Kentucky Office of Highway Safety’s 3D Simulator Educational Program, have been fully informed as to the nature of the above-described school activity and are aware their child will be participating in this program.

All student drivers participating in this 3D Simulator Educational Program, will be notified they must provide in person, to the Kentucky Office of Highway Safety on the day of the event, the following three items:

- 1. Valid Kentucky Driver’s License or Valid Kentucky Learners Permit**
- 2. 3D Simulator Educational Program Participant Waiver and Release Form**
- 3. 3D Simulator Educational Program Parental Consent and Release Form**

**\*Any student driver that is not able to produce all three items that are listed above, will not be allowed to drive the golf carts that are used in the 3D Simulator Educational Program.**

In consideration of the permission granted to the student drivers to participate in the above-described activity by the Kentucky Office of Highway Safety, I release and hold harmless the Kentucky Transportation Cabinet, Office of Highway Safety, it’s agents, employees, and officers, from any and all actions or causes of action of any nature for personal injury or property damage of any kind arising in any way from the student drivers participation in the above-described activity. I further acknowledge that this release is binding and that I have read the foregoing and understand its significance, and that I have executed this document voluntarily.

In witness whereof, I have signed this document on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_.  
(Month) (Year)

\_\_\_\_\_

Signature of School Administrator (Principal/Vice Principal)

\_\_\_\_\_  
Date

**\*SIGNATURE REQUIRED BY SCHOOL ADMINISTRATOR WITH AUTHORITATIVE RIGHTS**